				DV-120		
	ATTORNEY OR PARTY WITHOUT ATTORNEY (Name,	state bar number, and addre	ess):	FOR COURT USE ONLY		
H	-					
	TELEPHONE NO. (Optional):	FAX NO. (Optiona	D:			
	E-MAIL ADDRESS (Optional):	` ,	,			
	ATTORNEY FOR (Name):					
	SUPERIOR COURT OF CALIFORNIA, CO	UNTY OF				
	STREET ADDRESS:					
	MAILING ADDRESS:					
	CITY AND ZIP CODE:					
	BRANCH NAME:					
	PERSON TO BE PROTECTED:		☐ PETITIONER/PLAINTIFF			
			RESPONDENT/DEFENDANT			
	PERSON TO BE RESTRAINED:		PETITIONER/PLAINTIFF			
L			RESPONDENT/DEFENDANT			
	RESPONSIVE DECLARA (Domestic					
	HEARING DATE	ГІМЕ	DEPT., ROOM or DIVISION	CASE NUMBER:		
<ul> <li>This response will be considered by the judge at the court hearing. You must still obey the orders granted until the hearing.</li> <li>You may ask the court to make orders you request, including restraining orders. You must appear at the court hearing to give the court evidence about orders you request.</li> <li>If you do not appear at the court hearing, the court may grant the requested orders, which may last up to three years without further notice to you.</li> <li>You will be ordered to relinquish any firearms and any ammunition. Possession of a firearm may subject you to a fine and imprisonment.</li> </ul>						
۱r	I respond to the Application and Declaration for Order (Domestic Violence Prevention) as follows:					
1.	PERSONAL CONDUCT REST I do do not		e order requested.			
2.		O RELATED ORDE consent to the				
3.	STAY-AWAY ORDER I do do not	consent to the	e order requested.			
4.	4. CHILD CUSTODY  a. I consent to the custody order requested.  b. I request the following custody order (specify):					
5.	5. CHILD VISITATION  a. I consent to the visitation order requested.  b. I request the following visitation order (specify):					
6.	CHILD SUPPORT I do do not	consent to the	e order requested.			
7.	PROPERTY CONTROL I do do not	consent to the	e order requested.			
8.	ATTORNEY FEES I do do not	consent to the	e order requested.			

(Continued on reverse)



PERSON TO BE PROTECTED (name):	CASE NUMBER:				
PERSON TO BE RESTRAINED (name):					
9. RESTITUTION I do do not consent to the order requested.					
0. COUNSELING I do do not consent to the order requested.					
11. FIREARM RELINQUISHMENT  a. I do do not consent to the order requested.  b. I have have not relinquished my firearms to a local law enforcement agency or licensed gun dealer.  A copy of the receipt is attached. has previously been filed. (A receipt must be filed with the court within 72 hours after receiving the order.)					
12. RECORDING OF COMMUNICATIONS  I do do not consent to the order requested.					
13. OTHER ORDERS (see item 21 of the Application and Declaration for Order, form DV-100)  I do do not consent to the order requested.					
I request the court to order payment of my     a attorney fees if I win.     b out-of-pocket expenses incurred as the result of an ex parte temporary rest supporting facts. The expenses are:	raining order issued without sufficient				
15. I request the following additional orders:					
16. SUPPORTING INFORMATION  contained in the attached declaration					
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.					
Date:					
<b>k</b>					
	(SIGNATURE)				